PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application	or	Docket	Numbe
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CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY			
TO	TAL CLAIMS	22					1	RATE	FEE		RATE	FEE
FO	R		NUMBER	FILED	NUMBE	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 20 minus 20=			• 0	19	Ÿ	X\$ 9=		OR	X\$18=	36.0		
INDEPENDENT CLAIMS minus 3 =							X40=		ÖR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If	the difference		TOTAL		OR	TOTAL	346					
CLAIMS AS AMENDED - PART II									••	10	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL: FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus	**		=		X\$ 9=		ÒЯ	X\$18=	
ME	Independent		Minus	***	- 5-5 * .	=-,	27.10	X40=	* (*)	OR	χ80 = β	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE		-	************		· +135=_			+270=¥	
TOTAL												
ADDIT. FEE ADDIT. FEE (Column 1) (Column 3)												
AMENDMENT B	3.3	CLAIMS; REMAINING AFTER AMENDMENT		HIG NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI: TIONAL HEE
IDME	Total .		Minus			=		X\$ 9=		OR	X\$18≐	
MEN	Independent		Minus	***				X40=		OR	X80=	
4	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN	TCLAIM			400			+270=	-3. E. S.
3					* *			+135=		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
	Link Caryo	(Column 1)	and of the		mn 2) HEST	(Column 3	١.	. A				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE:
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	indep ndent	*	Minus	***		=		X40=		OR	X80=	
Ä	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							·		×		
	f the entry in a -t-	mn 1 in loss than t	ntn: in col	umn 2 w	to "N" is col	umn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "High st Number Previously Paid For" IN THIS SPACE is I so than 3, enter "3." ***If the "High st Number Previously Paid For" IN THIS SPACE is I so than 3, enter "3."												
	Th "Highest Nur	imber Previously P nber Previously Pa	ad For (Total (or Indepen	dent) is th	highest numb	er fo	und in the ap	propriat bo	x in c	olumn 1.	•